Case 16-13490 Doc 1 Filed 04/20/16 Entered 04/20/16 15:18:21 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Kevin First name A Middle name O'Connell Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8778	

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Case number (if known)

Debtor 1 Kevin A O'Connell

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)		
	doing business as names	EINs	EINs		
5.	Where you live	3100 N Lake Shore Dr, Apt 1113	If Debtor 2 lives at a different address:		
		Chicago, IL 60657 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Cook County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Document Case number (if known) Debtor 1 Kevin A O'Connell

Par	Tell the Court About	our Ba	ankruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are				f each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.	
	choosing to file under	Chapter 7					
		☐ Ch	napter 11				
		☐ Ch	napter 12				
		☐ Ch	napter 13				
8.	How you will pay the fee		about how yo	u may pay. Typic attorney is submi	ally, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with	
					Ilments. If you choose this optio (Official Form 103A).	on, sign and attach the Application for Individuals to Pay	
			I request tha	t my fee be waiv	red (You may request this option	n only if you are filing for Chapter 7. By law, a judge may,	
						ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out	
						ial Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the	■ No					
	last 8 years?	☐ Ye					
			District			Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is	☐ Ye					
	not filing this case with you, or by a business partner, or by an affiliate?	ப 16-	3.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	□ No	Go to li	ne 12.			
	residence?				ned an eviction judgment agains	t you and do you want to stay in your residence?	
		Ye	s 1.25 yo	No. Go to line 12	, , ,	.,	
			_				
				Yes. Fill out <i>Initia</i> bankruptcy petiti		Judgment Against You (Form 101A) and file it with this	

Deb	otor 1 Kevin A O'Connel	I		Document	Page 4 of 53	Case number (if known)
Part	t 3: Report About Any Bu	sinesses	You Own :	as a Sole Proprietor		
	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to F			
		☐ Yes.	Name a	and location of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name (of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numbe	r, Street, City, State & ZIF	² Code	
	it to this petition.		Check	the appropriate box to de	scribe your business:	
				Health Care Business (as	s defined in 11 U.S.C.	§ 101(27A))
				Single Asset Real Estate	(as defined in 11 U.S.	C. § 101(51B))
				Stockbroker (as defined i	in 11 U.S.C. § 101(53A))
				Commodity Broker (as de	efined in 11 U.S.C. § 10	01(6))
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the in 11 U.S.C. 1116(1)(B).				must attach your most recent balance sheet, statement of
	For a definition of small	■ No.	I am no	ot filing under Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fili Code.	ng under Chapter 11, but	I am NOT a small bus	ness debtor according to the definition in the Bankruptcy
		☐ Yes.	l am fili	ng under Chapter 11 and	I am a small business	debtor according to the definition in the Bankruptcy Code.
Part	t 4: Report if You Own or	Have Any	/ Hazardoι	s Property or Any Prop	erty That Needs Imme	ediate Attention
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to	— 103.	What is th	e hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			ate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs		Where is	the property?		

Number, Street, City, State & Zip Code

urgent repairs?

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Debtor 1 Kevin A O'Connell

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Kevin A O'Connel	ıı	Document	Page 6 of 53	f known)
Par			enorting Purnoses	<u> </u>	, <u> </u>
	What kind of debts do you have?	16a.			d in 11 U.S.C. § 101(8) as "incurred by an
	,		□ No. Go to line 16b.	a,, c. nodochola palipooci	
			Yes. Go to line 17.		
		16b.		s debts? Business debts are debts that tor through the operation of the busine	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you owe tha	t are not consumer debts or business o	debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses	Yes.	are paid that funds will be available	estimate that after any exempt propert to distribute to unsecured creditors?	y is excluded and administrative expenses
	are paid that funds will		■ No		
	be available for distribution to unsecured creditors?		☐ Yes		
18.	How many Creditors do you estimate that you	1 -49		<u> </u>	<u> </u>
	owe?	□ 50-99 □ 100-19		□ 5001-10,000 □ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000
		☐ 200-99	55	_ 10,000 20,000	
19.	How much do you	□ \$0 - \$9	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000 001 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.	How much do you estimate your liabilities	□ \$0 - \$9	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	to be?	_ ' '	001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
			σοι φοσο,σσο	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Par	t 7: Sign Below				
For	you	I have ex	amined this petition, and I declare ur	nder penalty of perjury that the informat	ion provided is true and correct.
				aware that I may proceed, if eligible, un vailable under each chapter, and I choo	
			rney represents me and I did not pay it, I have obtained and read the notice	or agree to pay someone who is not a e required by 11 U.S.C. § 342(b).	n attorney to help me fill out this
		I request	relief in accordance with the chapter	of title 11, United States Code, specific	ed in this petition.
		bankrupto and 3571	cy case can result in fines up to \$250	ealing property, or obtaining money or p 0,000, or imprisonment for up to 20 yea	roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519
		Kevin A	n A O'Connell A O'Connell e of Debtor 1	Signature of Debtor 2	
		Executed	on April 12, 2016	Executed on	
			MM / DD / YYYY		DD / YYYY

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Debtor 1 Kevin A O'Connell Page 7 01 53

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Thomas W. Lynch	Date	April 12, 2016			
Signature of Attorney for Debtor		MM / DD / YYYY			
Thomas W. Lynch Printed name					
Law Office of Thomas W. Lynch, P.C.					
9231 S. Roberts Road Hickory Hills, IL 60457					
Number, Street, City, State & ZIP Code					
Contact phone (708) 598-5999	Email address	twlpc@att.net			
6194247					
Bar number & State					

		1700.11111	<u>:::::: Paue o 01:55</u>	<u> </u>	
Fill in this infor	mation to identify your	case:			
Debtor 1	Kevin A O'Conne	II			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	70,484.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	70,484.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	7,508.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	65,283.12
	Your total liabilities	\$	72,791.12
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,675.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,674.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Case number (if known) Debtor 1 Kevin A O'Connell

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,795.17 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	23,054.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	23,054.00

		Document	Page 10 of 53		
Fill in this info	rmation to identify yo	our case and this filing:			
Debtor 1	Kevin A O'Cor	nell			
Debter 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the	e: NORTHERN DISTRICT OF ILI	LINOIS		
	, ,				
Case number			<u> </u>		☐ Check if this is an
					amended filing
Official Fo	orm 106A/B				
_	_				
Scneau	le A/B: Pro	pperty			12/15
Answer every que Part 1: Describe Do you own or No. Go to Pa	estion. e Each Residence, Build have any legal or equit	ach a separate sheet to this form. On ding, Land, or Other Real Estate You (able interest in any residence, buildir	Own or Have an Interest In	es, write your name and ca	se number (if known).
		equitable interest in any vehicles			
B. Cars, vans, t □ No ■ Yes	rucks, tractors, spor	t utility vehicles, motorcycles			
3.1 Make:	Chevrolet	Who has an interest in	the property? Chack and	Do not deduct secured	claims or exemptions. Put
	Malibu		the property: Check one		red claims on Schedule D:
Model:	2012	Debtor 1 only		Creditors write have Cit	aims Secured by Property.
Year:	ate mileage:	Debtor 2 only	O	Current value of the entire property?	Current value of the portion you own?
Other info		Debtor 1 and Debtor At least one of the de	•	entire property:	portion you own:
		At least one of the de	biolis and another		
		Check if this is com (see instructions)	munity property	\$9,400.00	\$9,400.00
Examples: Bo ■ No □ Yes 5 Add the doll pages you here.	ats, trailers, motors, policy and lear value of the portion have attached for Pare e Your Personal and Ho	or, ATVs and other recreational versional watercraft, fishing vessels, on you own for all of your entries to 2. Write that number here	snowmobiles, motorcycle a	y entries for	\$9,400.00 Current value of the portion you own?
					Do not deduct secured

6. **Household goods and furnishings** *Examples:* Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

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Debtor 1	Kevin A O'Connell			Case number (if known)	
Yes.	. Describe				
	misc.	household t	furniture		\$500.00
□ No	oles: Televisions and radios including cell phones, Describe	cameras, med	dia players, games	oment; computers, printers, scanners; music	collections; electronic devices
	l	computer	electronics including	one television and one	\$300.00
Examp ■ No	ibles of value bles: Antiques and figurines other collections, men			oks, pictures, or other art objects; stamp, coir	, or baseball card collections;
Examp	nent for sports and hobbi ples: Sports, photographic, musical instruments Describe		other hobby equipment;	bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No	ms ples: Pistols, rifles, shotgui Describe	ns, ammunitio	n, and related equipmen	t	
□ No	es ples: Everyday clothes, fur Describe	s, leather coat	ts, designer wear, shoes	, accessories	
	perso	nal wearing	apparel		\$500.00
■ No □ Yes. 13. Non-fa Exam ■ No □ Yes.	ples: Everyday jewelry, cos . Describe arm animals aples: Dogs, cats, birds, hou	rses		ding rings, heirloom jewelry, watches, gems,	gold, silver
■ No	. Give specific information.		u diu not alleady list, i	including any nearth alds you did not list	
	the dollar value of all of y art 3. Write that number			ny entries for pages you have attached	\$1,300.00
	escribe Your Financial Asset				
Do you o	wn or have any legal or e	quitable inter	est in any of the follow	ring?	Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Case 16-1349 Kevin A O'Connell		Filed 04/20/16 Document	Entered 04/20/16 15:18:21 Page 12 of 53 Case number (if known)	Desc Main
16 Coch					
□ No	nples: Money you have in			osit box, and on hand when you file your petiti	on
				pocket cash	\$300.00
			al accounts; certificates counts with the same ins	of deposit; shares in credit unions, brokerage stitution, list each.	houses, and other similar
			Institution	name:	
	17.1	Checking	Beverly E	3ank	\$650.00
	17.2	. Savings	PNC Ban	k	\$50.00
Exam	s, mutual funds, or publ			ney market accounts	
■ No □ Yes		Institution or i	ssuer name:		
joint o	venture			orporated businesses, including an interes	st in an LLC, partnership, and
☐ Yes	. Give specific informatio N	n about them ame of entity:		% of ownership:	
Nego		e personal check	ks, cashiers' checks, pro	egotiable instruments missory notes, and money orders. by signing or delivering them.	
■ No □ Yes	. Give specific information	n about them suer name:			
	ement or pension accounples: Interests in IRA, ER		11(k), 403(b), thrift saving	gs accounts, or other pension or profit-sharing	plans
■ Yes	. List each account separ	ately. e of account:	Institution	name:	
	Per	nsion	Pension	w/ Chicago Public Schools	\$55,000.00
Your Exam		sits you have ma		ntinue service or use from a company ctric, gas, water), telecommunications compa	nies, or others
■ No □ Yes			Institution	name or individual:	
23. Annui	ities (A contract for a per	iodic payment o	f money to you, either fo	r life or for a number of years)	
■ No □ Yes	lssuer na	me and descrip	tion.		
26 U.S	sts in an education IRA, 5.C. §§ 530(b)(1), 529A(b)			ogram, or under a qualified state tuition pro	ogram.
■ No □ Yes	Institution	n name and des	cription. Separately file t	he records of any interests.11 U.S.C. § 521(c)	:

		Case 16-13490	Doc 1	Filed 04/20/16	Entered 04/20/16 15:18:21	Desc Main
De	ebtor 1	Kevin A O'Connell		Document	Page 13 of 53 Case number (if known)	
25.	Trusts,	equitable or future intere	sts in prope	rty (other than anythin	g listed in line 1), and rights or powers ex	ercisable for your benefit
		Give specific information a	bout them			
26.	Examp ■ No	s, copyrights, trademarks oles: Internet domain names Give specific information a	s, websites, p			
27.	License	es, franchises, and other	general inta	ngibles		
	■ No	oles: Building permits, exclu Give specific information a		, cooperative associatior	n holdings, liquor licenses, professional licens	ses
M		property owed to you?				Current value of the
						portion you own? Do not deduct secured claims or exemptions.
28.	_	unds owed to you				
	□ No ■ Yes.	Give specific information at	oout them, inc	cluding whether you alrea	ady filed the returns and the tax years	
			2015	income tax refund	expected	\$3,284.00
_			ļ			
29.	■ No			usal support, child suppo	ort, maintenance, divorce settlement, propert	y settlement
30.	Examp	amounts someone owes y bles: Unpaid wages, disabili benefits; unpaid loans	ty insurance ¡		efits, sick pay, vacation pay, workers' compe	ensation, Social Security
	■ No □ Yes.	Give specific information				
31.		ts in insurance policies bles: Health, disability, or life	e insurance; h	nealth savings account (l	HSA); credit, homeowner's, or renter's insura	nce
		Name the insurance compa		olicy and list its value.		
		Com	pany name:		Beneficiary:	Surrender or refund value:
32.	If you a	erest in property that is dare the beneficiary of a livin ne has died.			ed surance policy, or are currently entitled to rec	eive property because
		Give specific information				
33.		against third parties, who les: Accidents, employmen			it or made a demand for payment to sue	
		Describe each claim				
34.	_	contingent and unliquidate	ed claims of	every nature, including	g counterclaims of the debtor and rights t	o set off claims
	■ No □ Yes.	Describe each claim				
35.	Any fin	ancial assets you did not	already list			

Debtor 1	Kevin A O'Connell	Document	Page 14 of 53 Case number		
⊔ Yes.	Give specific information				
	the dollar value of all of your entrie: art 4. Write that number here				,284.00
Part 5: De	escribe Any Business-Related Property Y	∕ou Own or Have an Interest	In. List any real estate in Part 1.		
37. Do you	own or have any legal or equitable inter				
	Go to line 38.				
				Current volu	o of the
				Current valu portion you o Do not deduc claims or exe	own? ct secured
38. Accou	nts receivable or commissions you	ı already earned			
■ No	D "				
⊔ Yes.	Describe				
Exam	equipment, furnishings, and suppliples: Business-related computers, sof		opiers, fax machines, rugs, telephon	es, desks, chairs, electronic o	devices
■ No □ Yes	Describe				
	50001150				
	nery, fixtures, equipment, supplies	you use in business, and	I tools of your trade		
□ No ■ Yes	Describe				
100.	2000/ib0				
	misc. tools]	\$500.00
				<u> </u>	
41. Invent	ory				
■ No	Describe				
— 100.	Decoribe				
42. Interes	sts in partnerships or joint ventures	;			
■ No					
⊔ Yes.	Give specific information about them Name of entity		% of owners	hip:	
	·				
	mer lists, mailing lists, or other con	npilations			
■ No.			0.0.0.44444		
⊔ во уо	ur lists include personally identifiable in	iformation (as defined in 11 U	.S.C. § 101(41A))?		
	■ No				
	Yes. Describe				
44 Any hi	usiness-related property you did no	at already list			
■ No	usiness-related property you did no	t alleady list			
☐ Yes.	Give specific information				
45. Add 1	the dollar value of all of your entries	s from Part 5, including ຄ	ny entries for pages vou have atta	iched .	
	art 5. Write that number here				500.00

Best Case Bankruptcy

		Case 16-13490	DOC 1	Document	Page 15 of	4/20/16 15:18:21 53	Desc Main	
Debt	or 1	Kevin A O'Connell		Document	- age 15 or	Case number (if known)		
Part 6		scribe Any Farm- and Comme ou own or have an interest in fa			n or Have an Interes	st In.		
46. D	o you	ı own or have any legal or	equitable in	iterest in any farm- or o	commercial fishin	g-related property?		
I	No.	Go to Part 7.						
[☐ Yes.	. Go to line 47.						
Part 7	7:	Describe All Property You C	Own or Have a	an Interest in That You Did	l Not List Above			
	Examp No	have other property of ar bles: Season tickets, country Give specific information	/ club membe					
54.	Add t	the dollar value of all of yo	our entries fr	om Part 7. Write that n	umber here			\$0.00
Part 8	3:	List the Totals of Each Part of	of this Form					
55.	Part 1	1: Total real estate, line 2						\$0.00
56.	Part 2	2: Total vehicles, line 5			\$9,400.00			
57.	Part 3	3: Total personal and hous	sehold items	s, line 15	\$1,300.00			
58.	Part 4	4: Total financial assets, li	ne 36		\$59,284.00			
59.	Part 5	5: Total business-related p	property, line	e 45	\$500.00			
60.	Part 6	6: Total farm- and fishing-r	related prop	erty, line 52	\$0.00			
61.	Part 7	7: Total other property not	listed, line	54 +	\$0.00			
62.	Total	personal property. Add lin	es 56 throug	h 61	\$70,484.00	Copy personal property to	otal \$7	0,484.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$70,484.00

		17000000		1.)
Fill in this infor	mation to identify your	case:		
Debtor 1	Kevin A O'Conne	II		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this amended fili

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
2012 Chevrolet Malibu Line from Schedule A/B: 3.1	\$9,400.00		\$2,400.00	735 ILCS 5/12-1001(c)	
Ellie Holli Geriedale Av.D. 3.1			100% of fair market value, up to any applicable statutory limit		
misc. household furniture Line from Schedule A/B: 6.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)	
Ellie Holli Schedule Adb. V.1			100% of fair market value, up to any applicable statutory limit		
misc household electronics including one television and one	\$300.00		\$300.00	735 ILCS 5/12-1001(b)	
laptop computer Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
personal wearing apparel Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)	
Ellie Holli Gelledale PAD.			100% of fair market value, up to any applicable statutory limit		
pocket cash Line from Schedule A/B: 16.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)	
Line from Goriedaie A/D. 19.1			100% of fair market value, up to any applicable statutory limit		

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evin A O'Connell Case number (if known)

De	Reviii A O Collileii					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Checking: Beverly Bank Line from Schedule A/B: 17.1	\$650.00		\$650.00	735 ILCS 5/12-1001(b)	
	Line from Governo 705.			100% of fair market value, up to any applicable statutory limit		
	Savings: PNC Bank Line from Schedule A/B: 17.2	\$50.00		\$50.00	735 ILCS 5/12-1001(b)	
	Line Hotti Schedule A/B. 11.2			100% of fair market value, up to any applicable statutory limit		
	Pension: Pension w/ Chicago Public Schools	\$55,000.00		100%	735 ILCS 5/12-1006	
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
	2015 income tax refund expected Line from Schedule A/B: 28.1	\$3,284.00		\$2,200.00	735 ILCS 5/12-1001(b)	
	Line Irom Schedule A/B. 20.1			100% of fair market value, up to any applicable statutory limit		
	misc. tools Line from Schedule A/B: 40.1	\$500.00		\$500.00	735 ILCS 5/12-1001(d)	
	Line Horr Schedule A.B. 40.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)	
	■ No	•		·		
	☐ Yes. Did you acquire the property cover	ed by the exemption w	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

	Case	16-13490	Doc 1	Filed 04/20/16 Document	Entere Page 18	ed 04/20/16 15:18 3 of 53	8:21 Des _	sc Main
Fill i	n this information	on to identify yoເ	ır case:					
Debt		Kevin A O'Conr		ddle Name	Last Name			
Debt (Spou	_	irst Name		ddle Name	Last Name			
Unite	ed States Bankru	ptcy Court for the	NORTH	IERN DISTRICT OF ILL	INOIS			
Case (if kno	e number wn)							Check if this is an
	cial Form 1 nedule D:		: Who I	Have Claims	Secure	d by Property		mended filing
s nee numb	ded, copy the Add er (if known).	ditional Page, fill it	out, number	the entries, and attach it		qually responsible for sup on the top of any additiona		
	•	e claims secured by		•				
_	_			he court with your other	schedules. Y	ou have nothing else to	report on this to	·rm.
•	Yes. Fill in all	of the information	below.					
Part	1: List All Se	cured Claims						
for ea	ch claim. If more t	han one creditor has	a particular	e secured claim, list the cre claim, list the other creditors ording to the creditor's nam	s in Part 2. As Î	Amount of claim Do not deduct the	Column B Value of collater that supports thi claim	
2.1	Pnc Bank		Describe t	ne property that secures t	the claim:	\$7,508.00	\$9,400.	.00 \$0.00
	Creditor's Name			evrolet Malibu				
	Po Box 3180 Pittsburgh, P	A 15230	As of the dapply.	ate you file, the claim is:	Check all that			
	Number, Street, City,		Unliquic					
	rumber, eneet, eny,	Oldio d Zip Oddo	Dispute					
Who	owes the debt?	Check one.		lien. Check all that apply.				
	ebtor 1 only ebtor 2 only		An agre	ement you made (such as in)	mortgage or se	cured		
_	ebtor 1 and Debtor	2 only	☐ Statutor	y lien (such as tax lien, me	chanic's lien)			
☐ At	least one of the de	ebtors and another	☐ Judgme	nt lien from a lawsuit				
□с	heck if this claim community debt		Other (i	ncluding a right to offset)	PMSI auto	loan		
		Opened 4/01/12 Last Active			4040			
Date	debt was incurred	3/17/16	Las	t 4 digits of account num	ber 1242			

Add the dollar value of your entries in Column A on this page. Write that number here: \$7,508.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$7,508.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Docu	ment Page 19	9 of 53	
Fill in	this inform	ation to identify your	case:			
Debto	r 1	Kevin A O'Connel	I			
	_	First Name	Middle Name	Last Name		
Debto (Spouse	r 2 if, filing)	First Name	Middle Name	Last Name		
Linitad	I States Ban	kruptcy Court for the:	NORTHERN DISTI	DICT OF ILLINOIS		
United	States ban	kruptcy Court for the.	NORTHERN DISTI	RICT OF ILLINOIS		
	number					
(if knowr	า)					Check if this is an amended filing
						amended ming
Offic	ial Form	106E/F				
Sche	edule E/	F: Creditors W	ho Have Uns	ecured Claims		12/15
Schedu Schedu eft. Atta	le G: Execute le D: Credito ach the Cont nd case num	ory Contracts and Unexpirs Who Have Claims Sect	ired Leases (Official Four ured by Property. If mo e. If you have no infor	orm 106G). Do not include ore space is needed, copy t	contracts on Schedule A/B: Proper any creditors with partially secure the Part you need, fill it out, numbe do not file that Part. On the top of a	d claims that are listed in er the entries in the boxes on the
1. Do	any creditor	s have priority unsecured	d claims against you?			
	No. Go to Pa	rt 2.				
	Yes.					
Part 2	List All	of Your NONPRIORIT	Y Unsecured Claim	8		
3. Do	any creditor	s have nonpriority unsec	ured claims against yo	ou?		
	No. You have	e nothing to report in this pa	art. Submit this form to t	he court with your other sche	edules.	
	Yes.					
un: tha	secured claim	, list the creditor separately	for each claim. For each	h claim listed, identify what t	b holds each claim. If a creditor has ype of claim it is. Do not list claims al three nonpriority unsecured claims f	Iready included in Part 1. If more
						Total claim
4.1		lorgan Chase Ba	Last 4	digits of account number	0171	\$23,054.00
	501 Blee		When v	vas the debt incurred?	Opened 1/01/05 Last Act 9/08/14	tive
	Utica, N			and data way file the alaim i	in Charle all that apply	
		eet City State Zlp Code red the debt? Check one.	AS OF U	ne date you file, the claim i	s: Спеск ан that арру	
	■ Debtor 1		☐ Cor	tingent		
	Debtor 2	•		quidated		
		I and Debtor 2 only	☐ Disp			
		one of the debtors and and	other Type o	NONPRIORITY unsecured	d claim:	
		f this claim is for a comm	-	dent loans		
	debt		Obli		ration agreement or divorce that you	did not
		n subject to offset?		s priority claims	a plane, and other states	
	■ No				g plans, and other similar debts	
	☐ Yes		□ Oth	er. Specify	.1	
				Educationa	ll .	

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Debtor 1 Kevin A O'Connell Case number (if know) 4.2 \$460.00 Cda/pontiac Last 4 digits of account number 7015 Nonpriority Creditor's Name Attn:Bankruptcy When was the debt incurred? Opened 12/01/13 Po Box 213 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Parkview Orthopedic ■ Other. Specify **Group** ☐ Yes 4.3 Chase Last 4 digits of account number 9485 \$11,522.00 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 3/01/10 Last Active When was the debt incurred? Po Box 15298 11/14/14 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.4 Chase Last 4 digits of account number 3222 \$1,247.00 Nonpriority Creditor's Name Opened 6/01/02 Last Active Attn: Correspondence Dept Po Box 15298 When was the debt incurred? 11/14/14 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Case number (if know)

Kevin A O'Conneil		Case number (if know)	
Consultants In Clinical Pathology Nonpriority Creditor's Name	Last 4 digits of account number		\$14.00
Bankrupty Dept PO Box 5979	When was the debt incurred?		
Carol Stream, IL 60197-5979			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Balance du	ue for unpaid medical services	
Credit Management, LP	Last 4 digits of account number	0573	\$342.00
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?		
Po Box 118288	when was the debt incurred?		
Carrolton, TX 75011			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify 11 Wow Ch	nicago	
Discover Financial	Last 4 digits of account number	3743	\$14,669.00
Nonpriority Creditor's Name	_	Opened 2/04/02 Lest Astiss	•
Attn: Bankruptcy Po Box 3025	When was the debt incurred?	Opened 2/01/02 Last Active 9/15/15	
New Albany, OH 43054			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Other Specify Credit Card		
☐ Yes	Other Specify Credit Card	J.	

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Debt	or 1 Kevin A O'Connell	Case number (if know)	
4.8	DSG Collect	Last 4 digits of account number	\$2,136.06
	Nonpriority Creditor's Name 2250 E Devon Ave Ste. 352 Des Plaines, IL 60018-4521	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	□ Continued	
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	<u></u>	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify collection agency for Gateway Foundation	
4.9	HCR Manor Care	Last 4 digits of account number	\$1,030.00
	Nonpriority Creditor's Name Manor Care at Oak Lawn East	When was the debt incurred?	
	9401 S Kostner		
	Oak Lawn, IL 60453	_	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Balance due for unpaid medical services	
4.1	Heartland Care Partners	Last 4 digits of account number	\$98.00
<u> </u>	Nonpriority Creditor's Name Bankruptcy Dept	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·
	L2540 Columbus, OH 43260		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify Balance due for unpaid medical services

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Page 23 of 53 Case number (if know) Document Debtor 1 Kevin A O'Connell

Heartland Pharmacy of IL	Last 4 digits of account number	\$12.89
Nonpriority Creditor's Name Bankruptcy Dept PO Box 72413	When was the debt incurred?	
Cleveland, OH 44192-0002 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Balance due for unpaid medical services	
1 Illinois Collection Se	Last 4 digits of account number 4403	\$78.00
Nonpriority Creditor's Name	 -	<u> </u>
8231 185th St Ste 100	When was the debt incurred? Opened 10/01/15	
Tinley Park, IL 60487 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Collection Attorney Radiology Imaging Specialists	
Illinois Collection Se	Last 4 digits of account number 5998	\$78.00
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ. σ.σ.
8231 185th St Ste 100	When was the debt incurred? Opened 10/01/15	
Tinley Park, IL 60487 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	7.6 of the date you me, the dammer. Oneok an that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Collection Attorney Radiology Imaging Specialists	

Document Page 24 of 53 Debtor 1 Kevin A O'Connell Case number (if know) 4.1 **Illinois Collection Se** 5997 \$54.00 Last 4 digits of account number Nonpriority Creditor's Name 8231 185th St Ste 100 When was the debt incurred? Opened 10/01/15 Tinley Park, IL 60487 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Radiology Imaging ☐ Yes Other. Specify Specialists 4.1 \$471.65 Illinois Gastroenterology Group Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **Bankruptcy Dept** PO Box 7630 Gurnee, IL 60031-7002 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Balance due for unpaid medical services Other. Specify 4.1 Little Co of Mary Hospital \$6,297.59 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **Bankruptcy Department** 2800 W 95th Street Evergreen Park, IL 60805-2746 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Balance due for unpaid medical services

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Midwest Center for Digestive Health	Last 4 digits of account number		\$471.65
Nonpriority Creditor's Name PO Box 7630	When was the debt incurred?		
Gurnee, IL 60031-7002 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Balance du	e for unpaid medical services	
Minuite Clinic of IL	Last 4 digits of account number		\$25.00
Nonpriority Creditor's Name Option 2 PO Box 8446	When was the debt incurred?		
Belfast, ME 04915 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
\square Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Balance du	e for unpaid medical services	
Peoples Gas	Last 4 digits of account number	8657	\$948.00
Nonpriority Creditor's Name 200 E Randolph St 20th Floor Chicago, IL 60601	When was the debt incurred?	Opened 4/13/11 Last Active 5/05/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	a plane and other circiles delta	
■ No	Debts to pension or profit-sharin		
☐ Yes	Other. Specify Agriculture	<u> </u>	

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4.2	T-Mobile Bankruptcy Team	Last 4 digits of account nun	nber	\$2,274.28					
	Nonpriority Creditor's Name PO Box 53410	When was the debt incurred							
	Bellevue, WA 98015-3410	As of the date you file, the claim is: Check all that apply							
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the c	laim is: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	□ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unse	ecured claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a report as priority claims	a separation agreement or divorce that you did not						
	■ No		sharing plans, and other similar debts						
	Yes	·	e due for unpaid services						
Part	3: List Others to Be Notified About a D	ebt That You Already Listed							
is tı hav	rying to collect from you for a debt you owe to s	someone else, list the original credi nat you listed in Parts 1 or 2, list the	that you already listed in Parts 1 or 2. For examp itor in Parts 1 or 2, then list the collection agency additional creditors here. If you do not have add	here. Similarly, if you					
Name	e and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?						
	: & Gaines	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai	ms					
	W Glenn Ave		Part 2: Creditors with Nonpriority Unsecured	Claims					
wne	eeling, IL 60090	Last 4 digits of account number	8266						
Name	e and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?						
	ersified Consultants, Inc.	Line 4.20 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Clai	ms					
	Box 551268		Part 2: Creditors with Nonpriority Unsecured	Claims					
Jacr	ksonville, FL 32255-1268	Last 4 digits of account number							
Name	e and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?						
	Services_	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai	ms					
	kruptcy Department		■ Part 2: Creditors with Nonpriority Unsecured	Claims					
	Box 1545 ston, TX 77251								
Hou	Stoll, 17 77231	Last 4 digits of account number							
Name	e and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?						
	Services	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai	ms					
	kruptcy Dept		■ Part 2: Creditors with Nonpriority Unsecured	Claims					
	0 Gulfton ston, TX 77081								
1100	3.011, 17.77001	Last 4 digits of account number							
Name	e and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?						
	R Manor Care	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai	ms					
	ility 0468		■ Part 2: Creditors with Nonpriority Unsecured	Claims					
	Box 637602 cinnati, OH 45263-7602								
Ciric	Siman, O11 43203-7002	Last 4 digits of account number							
Name	e and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?						
	rtland Pharmacy of IL	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai	ms					
	kruptcy Dept		■ Part 2: Creditors with Nonpriority Unsecured						
	S Fronatage Rd, Ste 400 odridge, IL 60517		, ,						
****	ourings, it out it	Last 4 digits of account number							
Name	e and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?						
	S Associates of New Jersey	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai	ms					
1930	O Olney Ave		■ Part 2: Creditors with Nonpriority Unsecured	Claims					

Official Form 106 E/F

Debtor 1 Kevin A O'Connell	Document Page 27 of 53 Case number (if know)
Cherry Hill, NJ 08003	Last 4 digits of account number
Name and Address Radiology Imaging Specialists LTD 39645 Treasury Center Chicago, IL 60694-9000	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address Radiology Imaging Specialists LTD 39645 Treasury Center Chicago, IL 60694-9000	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.13 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
_	Last 4 digits of account number
Name and Address Radiology Imaging Specialists LTD 39645 Treasury Center Chicago, IL 60694-9000	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
-	Last 4 digits of account number
Name and Address Receivables Performance Management PO Box 1548	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.20 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Lynnwood, WA 98046-1548	Last 4 digits of account number
Name and Address Receivables Performance Management 20816 44th Ave W	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.20 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Lynnwood, WA 98036	Last 4 digits of account number
Name and Address Transworld Systems Inc Bankruptcy Department 507 Prudential Rd	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Horsham, PA 19044	Last 4 digits of account number
Name and Address Transworld Systems Inc Bankruptcy Department PO Box 17221	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.18 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Wilmington, DE 19850	Last 4 digits of account number
Name and Address United Collection Bureau 5620 Southwyck Blvd Suite 206	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Toledo, OH 43614	Last 4 digits of account number
Name and Address United Recovery Systems PO Box 722929	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Houston, TX 77272-2929	Last 4 digits of account number
Part 4: Add the Amounts for Each Type of	
Total the emounts of cortain types of uncocure	d claims. This information is for statistical reporting purposes only 28 H.S.C. 8150. Add the amounts for each

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total	
claims	

6a. Domestic support obligations

6a. \$ **0.00**

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Debtor 1 Ke	evin A C	Document Page	Case r	າumber (if k	know)
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here	e. 6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	23,054.00
claims rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	: 6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	42,229.12
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	65,283.12

Official Form 106 E/F

		1200000			
Fill in this infor	mation to identify your	case:			
Debtor 1	Kevin A O'Conne	Kevin A O'Connell			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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			III Paue su c	11 :3:3	
Fill in this i	information to identify your	case:			
Debtor 1	Kevin A O'Conne	II			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	r) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
United State	es bankrupicy Court for the.	NORTHERN DISTRICT	OI ILLINOIS		
Case numb	er				☐ Check if this is an
(ii iaiomi)					amended filing
o	5 40011				
	Form 106H	_			
Sched	ule H: Your Cod	ebtors			12/15
ill it out, an our name	d number the entries in the and case number (if known)	boxes on the left. Attach . Answer every question	the Additional Page t	to this page. On the top o	eded, copy the Additional Page, of any Additional Pages, write
1. Do y	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
☐ Yes					
Arizona 	in the last 8 years, have you a, California, Idaho, Louisiana,				states and territories include
	Go to line 3. Did your spouse, former spou	use, or legal equivalent live	e with you at the time?		
in line : Form 1	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
_	Column 1: Your codebtor ame, Number, Street, City, State and Zi	P Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
N	lame			□ Schedule E/F, line	e
				☐ Schedule G, line	
	lumber Street Sity	State	ZIP Code		
22				□ Cake dula D. P	
3.2	lame			☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule C, line	<u> </u>
N	lumber Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify	your case:							
		A O'Connell							
	btor 2 Duse, if filing)				_				
Uni	ited States Bankruptcy Court	for the: NORTHERN DISTRI	CT OF ILLINOIS		_				
	se number nown)		_			Check if this is: An amende A suppleme	. 3	g postpetition	chapter
\bigcirc	fficial Form 1061					13 income a	as of the fo	llowing date:	
	fficial Form 106l chedule I: Your	I				MM / DD/ Y	YYY		
Be a sup spo atta	as complete and accurate as plying correct information. use. If you are separated an ch a separate sheet to this	s possible. If two married per If you are married and not fil nd your spouse is not filing w form. On the top of any addit	ing jointly, and your s vith you, do not include	spouse i de inforr	s living nation a	with you, inclusions in your spo	ıde inform use. If mo	nation about ore space is	your needed,
	tt 1: Describe Employ	ment							
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fil	ing spouse	
	If you have more than one j		■ Employed			☐ Emplo	yed		
	attach a separate page with information about additiona		□ Not employed	☐ Not employed			☐ Not employed		
	employers.	Occupation	building engine	er					
	Include part-time, seasonal, self-employed work.	, or Employer's name	Village of Homewood-Flos	ssmoor					
	Occupation may include stu or homemaker, if it applies.								
		How long employed	there? 1 week						
Pai	rt 2: Give Details Abou	ut Monthly Income							
	imate monthly income as of use unless you are separated	the date you file this form. If	you have nothing to re	eport for	any line,	write \$0 in the	space. Inc	lude your nor	n-filing
	ou or your non-filing spouse ha e space, attach a separate sh	ave more than one employer, cheet to this form.	combine the information	n for all e	mployer	s for that perso	n on the lir	nes below. If	you need
					Fo	r Debtor 1		otor 2 or ng spouse	
2.		s, salary, and commissions (but in the month		2.	\$	5,250.00	\$	N/A	
3.	Estimate and list monthly	overtime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income.	Add line 2 + line 3.		4.	\$	5,250.00	\$	N/A	

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Debt	tor 1	Kevin A O'Connell	_	Case r	number (if known)			
	Cop	ny line 4 here	4.	For I	Debtor 1 5,250.00		r Debtor 2 or n-filing spouse N/A	
5.				-		· –		<u> </u>
5.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	all payroll deductions: Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$ \$ \$ \$ \$ \$	1,575.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ +	N/. N/. N/. N/. N/. N/.	A A A A A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,575.00	\$_	N/	<u>A</u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,675.00	\$_	N/	<u>A</u>
8.	8a. 8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8c. 8d. 8e. 8f. 8g. 8h.+		0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/. N/. N/. N/. N/. N/. N/.	A A A A A
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_	N	/A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	3	3,675.00 + \$		N/A = \$	3,675.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depen	•	•	•	Schedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					12. \$ Com k	
13.	Do	you expect an increase or decrease within the year after you file this form	?				mont	hly income
		No.						
		Yes. Explain: Debtor just started work, the amounts listed are	what I	Debto	r expects to	recei	ve	

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Eill	in this informs	ation to identify yo	our case:						
	otor 1	Kevin A O'C				Chec	k if this is:		
Deb	NOI I	Kevin A U C	onnen				An amended filing		
	otor 2 ouse, if filing)						A supplement show 13 expenses as of	ving postpetition chapt	er
(Spc	ouse, ii iiiiiig)					_	13 expenses as or	dire following date.	
Unit	ed States Bankı	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY		
l	e number nown)								
		orm 106J							
		J: Your							2/15
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this t n.					
		ribe Your House	hold						
1.	Is this a joir								
	■ No. Go to		in a sonar	ate household?					
	□ res. Doe		ın a separ	ate nousenoid?					
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debt	or 2.		
2.	Do you hav	e dependents?	■ No						
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state							□ No	
	dependents	names.						□ Yes	
								□ No □ Yes	
								☐ Yes	
								□ Yes	
								□ No	
								☐ Yes	
3.		penses include	.	No					
		f people other t d your depende		Yes					
Par	t 2: Estim	ate Your Ongoi	na Month	ly Evnenses					
Est exp	imate your ex	xpenses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp					
the		h assistance an		government assistance it cluded it on <i>Schedule I:</i> Y			Your exp	enses	
(0		,01.,							
4.		or home owners and any rent for th		ses for your residence. In or lot.	nclude first mortgage	4. \$		1,250.00	
	If not include	ded in line 4:							
	4a. Real	estate taxes				4a. \$		0.00	
	•	erty, homeowner's				4b. \$		0.00	
				upkeep expenses		4c. \$		0.00	
5		owner's associat		dominium dues our residence , such as ho	mo oquity loons	4d. \$ 5. \$		0.00	
IJ.	Auuitiviidi l	HOLLUAUE DAVIII	ciilə itti VC	zur r estuente, Such as not	me eddity 10ams	ວ. ລ		U UU	

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Debtor	1 Kevin A	O'Connell	Case num	ber (if known)	
6. U	tilities:				
5. 6		, heat, natural gas	6a.	\$	125.00
6k	•	wer, garbage collection	6b.		0.00
60		e, cell phone, Internet, satellite, and cable services	6c.		200.00
60	•		6d.		0.00
		ekeeping supplies	7.	·	400.00
		children's education costs	8.	\$	0.00
-		lry, and dry cleaning	9.	\$	120.00
	-	oroducts and services	9. 10.	· · · — — — — — — — — — — — — — — — — —	
					30.00
		Intal expenses	11.	\$	250.00
	r ansportation o not include c	. Include gas, maintenance, bus or train fare.	12.	\$	500.00
		clubs, recreation, newspapers, magazines, and books	13.	· ·	25.00
		tributions and religious donations	14.		
		inbutions and religious donations	14.	Φ	0.00
	isurance. o not include ir	nsurance deducted from your pay or included in lines 4 or 20.			
	5a. Life insura		15a.	\$	0.00
	5b. Health ins		15b.		0.00
	5c. Vehicle in		15b.		98.00
			15d.		
		urance. Specify:	13u.	Φ	0.00
_	axes. Do not in pecify:	nclude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
		ease payments:		<u> </u>	0.00
		ents for Vehicle 1	17a.	\$	308.00
		ents for Vehicle 2	17b.	· · · — — — — — — — — — — — — — — — — —	0.00
		ecify: student loans	17c.		168.00
	7d. Other. Sp		17d.	·	0.00
		of alimony, maintenance, and support that you did not report as			
		your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
). O	ther payment	s you make to support others who do not live with you.		\$	0.00
S	pecify:		19.		
		erty expenses not included in lines 4 or 5 of this form or on Sch			
20	Ja. Mortgage	s on other property	20a.	\$	0.00
20	0b. Real esta	te taxes	20b.	\$	0.00
20	c. Property,	homeowner's, or renter's insurance	20c.	\$	0.00
20	Od. Maintena	nce, repair, and upkeep expenses	20d.	\$	0.00
		ner's association or condominium dues	20e.	\$	0.00
i. o	ther: Specify:	tools needed for employment	21.	+\$	200.00
				Ţ	
	-	monthly expenses			_
	2a. Add lines 4	· ·		\$	3,674.00
22	2b. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22	2c. Add line 22	a and 22b. The result is your monthly expenses.		\$	3,674.00
}. С	alculate vour	monthly net income.			
	•	12 (your combined monthly income) from Schedule I.	23a.	\$	3,675.00
		r monthly expenses from line 22c above.	23b.		3,674.00
۷.	Copy you	i monuny expenses nom into 220 above.	200.	Ψ	3,074.00
23	3c. Subtract v	your monthly expenses from your monthly income.			
_,		t is your monthly net income.	23c.	\$	1.00
		an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect you			or decrease because c
		ou expect to finish paying for your car loan within the year of do you expect you terms of your mortgage?	ur mortgage	payment to increase	FOI GEOLEGISE DECAUSE (
	No.				
		Evoluin horo:			
∟] Yes.	Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Kevin A O'Conne				
20010.	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
If two married p You must file th obtaining mone years, or both. 1	eople are filing togethe	n connection with a bank	nsible for supplying cor		
Did you pa	ay or agree to pay some	eone who is NOT an attori	ney to help you fill out I	bankruptcy forms?	
■ No					
☐ Yes.	Yes. Name of person Attach Bankruptcy Petition Preparer Declaration, and Signature (Official I				
	alty of perjury, I declare re true and correct.	that I have read the sumr	mary and schedules file	ed with this declaration and	
X /s/ Ke	vin A O'Connell		X		
	A O'Connell ure of Debtor 1		Signature of	f Debtor 2	
Date	April 12, 2016		Date		

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Fill in	this information	to identify you	ır case:							
Debtor		vin A O'Conn	Middle Name	Last Name						
Debtor		Ivanic	Widdle Name	Last Name						
(Spouse	if, filing) First	Name	Middle Name	Last Name						
United	States Bankrupt	cy Court for the:	NORTHERN DISTRICT C	F ILLINOIS						
Case r	number									
(if known						Check if this is an				
						amended filing				
	ial Form '									
State	ement of F	Financial	Affairs for Individ	luals Filing for B	Bankruptcy	4/10				
			ible. If two married people a							
	ation. If more sp r (if known). Ans		, attach a separate sheet to testion.	this form. On the top of an	y additional pages, write yo	ur name and case				
	<u> </u>			Lived Defens						
Part 1:	Give Details	About Your Ma	arital Status and Where You	Lived Before						
1. W	hat is your curre	ent marital stati	us?							
	Married									
	Not married									
2. Dı	ring the last 3 y	ing the last 3 years, have you lived anywhere other than where you live now?								
_		, ,	,	, , , , , , , , , , , , , , , , , , , ,						
□	No Voc List all of	the places you	lived in the last 2 years. Do no	st include where you live now						
_	Yes. List all of	the places you	lived in the last 3 years. Do no	ot include where you live now	v.					
D	ebtor 1 Prior Ad	dress:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there				
1	10715 S Campbell		From-To:	☐ Same as Debtor	1	☐ Same as Debtor 1				
C	hicago, IL 606	55	January 2007			From-To:				
_			September 20	15						
	nnd territories incl No Yes. Make sui	ude Arizona, Ca	ver live with a spouse or leg alifornia, Idaho, Louisiana, Nev hedule H: Your Codebtors (Of ur Income	vada, New Mexico, Puerto R						
I all Z	Explain the	Sources or roc	di ilicollie							
			mployment or from operating to received from all jobs and a			endar years?				
		,	i have income that you receive	, 01						
	No									
	Yes. Fill in the	details								
_	163.1 111 111 1116	details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
For last calendar year: (January 1 to December 31, 2015)										
			■ Wages, commissions, bonuses, tips	\$20,026.00	☐ Wages, commissions, bonuses, tips					

Official Form 107

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Case number (if known) Document Debtor 1 Kevin A O'Connell

					51/			5.14					
					Debtor 1			Debtor 2					
					Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)			
			dar year be December		■ Wages, commissions bonuses, tips	,	\$85,549.00	☐ Wages, com bonuses, tips	missions,				
					☐ Operating a business			☐ Operating a	business				
5.	Inclu and winn	ide ind other iings.	come regard public bene If you are fil	lless of wheth fit payments; ing a joint cas	e during this year or the ter that income is taxable. Income, income; income; income and you have income the me from each source separate.	Examples on terest; diving at you rece	of other income are a dends; money collectived together, list it of	alimony; child supp cted from lawsuits; only once under De	royalties; ar ebtor 1.				
		No											
	_		Fill in the de	etails.									
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
					Debtor 1			Debtor 2					
					Sources of income Describe below.	each (befo	ss income from a source ore deductions and usions)	Sources of inc Describe below		Gross income (before deductions and exclusions)			
			y 1 of curre filed for bar	nt year until nkruptcy:	Unemployment		\$5,233.00						
			dar year: December	31, 2015)	Unemployment		\$5,538.00						
					Pension/Annuity distribution		\$9,783.00						
Pai	rt 3:	List	t Certain Pa	vments You	Made Before You Filed f	or Bankru	ptcv						
6.			r Debtor 1's Neither De	or Debtor 2' ebtor 1 nor D	s debts primarily consur ebtor 2 has primarily con personal, family, or house	mer debts nsumer de	? ebts. Consumer debt	's are defined in 11	U.S.C. § 10	01(8) as "incurred by an			
			During the	00 days hofo	re you filed for bankruptcy	did you b	ay any croditor a tota	ol of \$6 425* or mo	ro?				
			•	Go to line 7	, , ,	, did you p	ay arry creditor a tota	11 01 \$0,423 01 11101	16:				
			□ Yes	List below e	ach creditor to whom you editor. Do not include payn	nents for d	omestic support obliq						
			* Subject		payments to an attorney fo on 4/01/19 and every 3 ye			or after the date o	f adjustmen	t.			
		Yes.			or both have primarily consumer debts. fore you filed for bankruptcy, did you pay any creditor a total of \$600 or more?								
			□ _{No.}	Go to line 7									
			■ Yes	include pay	ach creditor to whom you ments for domestic suppor this bankruptcy case.								
	Cre	ditor'	's Name and	d Address	Dates of pay	ment	Total amount paid	Amount you still owe	Was this	payment for			

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Case number (if known) Document

Debtor 1 Kevin A O'Connell

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for			
	Acs/jp Morgan Chase Ba 501 Bleecker St Utica, NY 13501	various dates	\$3,000.00	\$23,054.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Student loan 			
	Pnc Bank Po Box 3180 Pittsburgh, PA 15230	various dates - caught up on car arrears	\$3,300.00	\$7,508.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other 			
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.							
	■ No □ Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment			
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited are insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name			
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures	•					
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes.	cy, were you a party in an						
	□ No							
	Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of the case			
	Discover Bank v. Kevin A O'Connell 2016 M1 108266	Collection	Circuit Court o County First Municipal Daley Center Chicago, IL 606	District	■ Pending □ On appeal □ Concluded			

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Page 39 of 53 Document ase number (if known) Debtor 1 **Kevin A O'Connell** 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Amount Date action was 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Value Describe what you contributed Dates vou more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Value of property Describe the property you lost and Describe any insurance coverage for the loss Date of your how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

Official Form 107

Address

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Description and value of any property

transferred

page 4

Amount of

Person Who Made the Payment, if Not You

Yes. Fill in the details.

Person Who Was Paid

Email or website address

Date payment

made

or transfer was

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Debtor 1 **Kevin A O'Connell**

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment		
	Law Office of Thomas W. Lynch, P.C. 9231 S. Roberts Road Hickory Hills, IL 60457 twlpc@att.net		+ reimbursemer ee and \$33.00 c		various dates	\$1,382.00		
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you	rs or to make payment			or transfer any prope	rty to anyone who		
	■ No □ Yes. Fill in the details.							
	Person Who Was Paid Address	Description and transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment		
	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes, Fill in the details.							
	Person Who Received Transfer Address Person's relationship to you				any property or s received or debts schange	Date transfer was made		
	Claire Roberts and Owen Yanz 10715 S Campbell Chicago, IL 60655 unrelated	single family re located at 1071 Ave, Chicago II	5 S Campbell	used fur expense search r during u which be	I \$35,637.01, ands for living and job elated expenses anemployment egan July 21, d lasted until	September 2015		
	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		ny property to a s	elf-settled tr	ust or similar device	of which you are a		
	Name of trust	Description and	value of the prope	erty transfer	red	Date Transfer was made		
Par	List of Certain Financial Accounts, Ins	struments, Safe Depos	it Boxes, and Stor	rage Units				
	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
	Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	cle me	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer		

Case 16-13490 Doc 1 Filed 04/20/16 Entered 04/20/16 15:18:21 Page 41 of 53 Case number (if known) Document Debtor 1 **Kevin A O'Connell** Last 4 digits of Name of Financial Institution and Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred XXXX-**Beverly Bank** closed due to \$0.00 Checking lack of funds □ Savings ☐ Money Market ☐ Brokerage Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

■ No □ Yes. Fill in the details.			
Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

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Case number (if known) Document Debtor 1 Kevin A O'Connell

25.	Have you notified any governmental unit of any release of hazardous material?							
		No Yes. Fill in the details.						
	LI Na	me of site		Governmental unit		Environmental law if you	Date of notice	
		Inte of Site Idress (Number, Street, City, State and ZIP Code)		Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
26.	Hav	ve you been a party in any judicial or ad	minis	strative proceeding under any envi	ronn	nental law? Include settlements	and orders.	
		No Yes. Fill in the details.						
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case	
Par	t 11	Give Details About Your Business or	r Con	nections to Any Business				
27.	Wit	hin 4 years before you filed for bankrup	otcy, o	did you own a business or have an	y of	the following connections to an	y business?	
		☐ A sole proprietor or self-employed	in a t	rade, profession, or other activity,	eith	er full-time or part-time		
		☐ A member of a limited liability com	pany	(LLC) or limited liability partnershi	ip (L	LP)		
		☐ A partner in a partnership		. ,	. `	,		
		☐ An officer, director, or managing e	vecui	tive of a cornoration				
				•				
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	No. None of the above applies. Go to Part 12.							
	Yes. Check all that apply above and fill in the details below for each business.					_		
	Business Name Address		ре	Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.		
	(Nu	mber, Street, City, State and ZIP Code)	Na	me of accountant or bookkeeper		Dates business existed		
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
		No						
		Yes. Fill in the details below.						
	Ad	me Idress mber, Street, City, State and ZIP Code)	Da	te Issued				
Par	12	Sign Below						
are t with	rue a b	ead the answers on this <i>Statement of Fi</i> and correct. I understand that making a ankruptcy case can result in fines up to 5. §§ 152, 1341, 1519, and 3571.	a fals	e statement, concealing property, o	or ol	btaining money or property by fr		
		rin A O'Connell	_	Olavariana af Dahitan O				
		A O'Connell ire of Debtor 1		Signature of Debtor 2				
Date	e _	April 12, 2016	_	Date				
Did y ■ N □ Y	0	attach additional pages to Your Statem	ent c	f Financial Affairs for Individuals F	Filinç	g for Bankruptcy (Official Form 1	07)?	
		pay or agree to pay someone who is no	ot an	attorney to help you fill out bankru	ıptcy	/ forms?		
■ N	0							
		Name of Person Attach the <i>Bankr</i> orm 107 State		Petition Preparer's Notice, Declaration of Financial Affairs for Individuals Filing			page 7	

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Case number (if known) Document

Debtor 1 Kevin A O'Connell

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Fill in this inform	nation to identify yo	ur case.		
Debtor 1	Kevin A O'Con First Name	Middle Name	Last Name	
Debtor 2	First Name	Middle Nove	Land Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the	e: NORTHERN DIST	RICT OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing
Official For	100			
Official For			' desale Ell'es es lles dese Ol	
Statemen	t of Intent	ion for indiv	iduals Filing Under Cl	napter / 12/15
If you are an indiv	vidual filing under o	hapter 7, you must fill	out this form if:	
	claims secured by			
_	•	y and the lease has no	ot expired.	
	er is earlier, unless		you file your bankruptcy petition or by the stime for cause. You must also send cop	
	ople are filing toget d date the form.	her in a joint case, bot	th are equally responsible for supplying o	correct information. Both debtors must
		sible. If more space is number (if known).	needed, attach a separate sheet to this f	orm. On the top of any additional pages,
Part 1: List Yo	ur Creditors Who F	lave Secured Claims		
information bel	•	1 Part 1 of Schedule D	: Creditors Who Have Claims Secured by	Property (Official Form 106D), fill in the
Identify the cree	ditor and the proper	ty that is collateral	What do you intend to do with the prop secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Pr	nc Bank		☐ Surrender the property.	□No
name:			Retain the property and redeem it.	
Description of	2012 Chevrolet	Malibu	Retain the property and enter into a	Yes
property	ZOTZ GHOVIOIO		Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:				
Part 2: List Yo	ur Unovoired Pers	onal Property Leases		
For any unexpired	d personal property	lease that you listed	in Schedule G: Executory Contracts and	Unexpired Leases (Official Form 106G), fill
			expired leases are leases that are still in he trustee does not assume it. 11 U.S.C.	effect; the lease period has not yet ended. § 365(p)(2).
Describe your ur	nexpired personal p	property leases		Will the lease be assumed?
Lessor's name:				□ No
Description of leas	sed			L No
Property:				☐ Yes
Lessor's name:				□ No
Description of leas	sed			
Property:				☐ Yes
Lessor's name:				□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Deb	otor 1	Kevin A O'Connell	Case number (if known)
	scriptior perty:	n of leased	☐ Yes
Des	sor's na scriptior perty:	ame: n of leased	□ No □ Yes
Des	sor's na scriptior perty:	ame: n of leased	□ No □ Yes
Des	sor's na scriptior perty:	ame: n of leased	□ No □ Yes
Des	perty:	ame: n of leased Sign Below	□ No
Und	er pena erty th		ated my intention about any property of my estate that secures a debt and any personal
^	Kevi	n A O'Connell ture of Debtor 1	Signature of Debtor 2
	Date	April 12, 2016	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-13490 Doc 1 Filed 04/20/16 Entered 04/20/16 15:18:21 Desc Main Document Page 50 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Kevin A O'Connell		Case No.					
		Debtor(s)	Chapter	7				
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR DE	EBTOR(S)				
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:							
	For legal services, I have agreed to accept		\$	1,382.00				
	Prior to the filing of this statement I have received		\$	1,382.00				
	Balance Due		\$	0.00				
2. \$	335.00 of the filing fee has been paid.							
3. T	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
4. T	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
5. I	I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are mem	bers and associates of my law firm.				
[☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name							
6. I	n return for the above-disclosed fee, I have agreed to re	nder legal service for all aspec	ts of the bankruptcy c	ase, including:				
b c	 Analysis of the debtor's financial situation, and rende Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credito [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hour 	ement of affairs and plan which ors and confirmation hearing, a educe to market value; ex ns as needed; preparation	h may be required; nd any adjourned hea emption planning;	rings thereof; preparation and filing of				
7. B	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			es, relief from stay actions or				
		CERTIFICATION						
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	y agreement or arrangement for	r payment to me for re	epresentation of the debtor(s) in				
	oril 12, 2016	/s/ Thomas W. Ly						
Do	nte	Thomas W. Lync Signature of Attorna						
		Law Office of Th	omas W. Lynch, P.	.C.				
		9231 S. Roberts Hickory Hills, IL						
		(708) 598-5999 F	Fax: (708) 598-6299)				
		twlpc@att.net Name of law firm						
		rume oj iuw jimi						

United States Bankruptcy Court Northern District of Illinois

In re	Kevin A O'Connell		Case No.	
		Debtor(s)	Chapter 7	
	VE	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	32
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credi	tors is true and correct to the	he best of my
Date:	April 12, 2016	/s/ Kevin A O'Connell Kevin A O'Connell Signature of Debtor		

Acs/ip Morga 639 436-13490 Doc 1 501 Bleecker St Utica, NY 13501

Barrymentept Page 52 of 53 6330 Gulfton Houston, TX 77081

Eileds 04/20/16 Entered 04/20/16 15:1/8:2ile diasco Main Option 2 PO Box 8446 Belfast, ME 04915

Blitt & Gaines 661 W Glenn Ave Wheeling, IL 60090

HCR Manor Care Manor Care at Oak Lawn East 9401 S Kostner Oak Lawn, IL 60453

MRS Associates of New Jersey 1930 Olney Ave Cherry Hill, NJ 08003

Cda/pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364

HCR Manor Care Facility 0468 PO Box 637602 Cincinnati, OH 45263-7602 Peoples Gas 200 E Randolph St 20th Floor Chicago, IL 60601

Chase

Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Heartland Care Partners Bankruptcy Dept L2540 Columbus, OH 43260

Pnc Bank Po Box 3180 Pittsburgh, PA 15230

Consultants In Clinical Pathology Bankrupty Dept PO Box 5979 Carol Stream, IL 60197-5979

Heartland Pharmacy of IL Bankruptcy Dept PO Box 72413 Cleveland, OH 44192-0002

Radiology Imaging Specialists LTD 39645 Treasury Center Chicago, IL 60694-9000

Credit Management, LP Attn: Bankruptcv Po Box 118288 Carrolton, TX 75011

Heartland Pharmacy of IL Bankruptcy Dept 940 S Fronatage Rd, Ste 400 Woodridge, IL 60517

Receivables Performance Managem PO Box 1548 Lynnwood, WA 98046-1548

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054 Illinois Collection Se 8231 185th St Ste 100 Tinley Park, IL 60487

Receivables Performance Managem 20816 44th Ave W Lynnwood, WA 98036

Diversified Consultants. Inc. PO Box 551268 Jacksonville, FL 32255-1268

Illinois Gastroenterology Group Bankruptcy Dept PO Box 7630 Gurnee, IL 60031-7002

T-Mobile Bankruptcy Team PO Box 53410 Bellevue, WA 98015-3410

DSG Collect 2250 E Devon Ave Ste. 352 Des Plaines, IL 60018-4521

Little Co of Mary Hospital Bankruptcy Department 2800 W 95th Street Evergreen Park, IL 60805-2746 Transworld Systems Inc Bankruptcy Department 507 Prudential Rd Horsham, PA 19044

GC Services Bankruptcy Department PO Box 1545 Houston, TX 77251

Midwest Center for Digestive Health PO Box 7630 Gurnee, IL 60031-7002

Transworld Systems Inc Bankruptcy Department PO Box 17221 Wilmington, DE 19850

United Collections at 16a13490 Doc 1 Filed 04/20/16 Entered 04/20/16 15:18:21 Desc Main 5620 Southwyck Blvd Document Page 53 of 53 Suite 206 Toledo, OH 43614

United Recovery Systems PO Box 722929 Houston, TX 77272-2929